

# Why fear Sterilization?

by CLARENCE J. GAMBLE, M.D.

THE TIME may come when your doctor will say, "You should not have any more children; we should plan to give you the permanent protection of sterilization."

Because this operation is relatively new, there are many persons who do not understand it, or who confuse it with castration. They have heard of the barnyard form of sterilization in which a bull calf is turned into a steer and a rooster chick into a capon by the removal of the sex glands, and they believe that human sterilization must be accomplished in the same way. They fear that a sterilized man may develop a soprano voice or that a woman may grow a beard, and that both may lose all sexual interest. Extensive medical statistics, based on the reports of patients many years after the operation, show that these changes do not occur.

In tubectomy, the modern operation for sterilization in both men and women, nothing is removed from the body. The surgeon simply locates and ties off the small tubes leading from the sex glands, preventing the further passage of the female cell, or ovum, and the sperm cells of the male. These minute cells are then absorbed by the body and the sterilized person can detect no change in appearance, feelings or desires other than the fact that no children are produced. Human sterilization is, therefore, altogether different from castration which removes the ovaries or testicles.

For either sex sterilization is a relatively uncomplicated operation. In a woman the Fallopian tubes which guide the egg from the ovary to the uterus lie in the lower part of the abdomen. To reach and close them the surgeon performs a salpingectomy — a procedure much like the simple removal of an appendix in the quiescent stage when it is not inflamed or infected. The patient usually remains in the hospital for a few days to allow for the healing of the short incision through

which the tubes were located and tied. A minimum of risk is associated with this type of abdominal operation.

In the male the operation called vasectomy is performed quickly and easily. The tube, known as the *vas deferens*, carries the spermatozoa from the testicles upward, just under the skin of the scrotum — the sac containing the testicles. Needing only a local anesthetic, a half-inch incision is made over each testicle and the surgeon closes the tubes in ten minutes or less. The patient can return to his home immediately and resume light work within a day or two.

Since some of the patient's spermatozoa are already in the seminal vesicle reservoir, the complete protection from parenthood does not begin until about six weeks have elapsed. Inasmuch as the operation on the husband is simpler and does not involve the expense of hospitalization, some couples prefer it to the one on the wife, even though she may be the one most concerned with the protection that sterilization affords.

Tens of thousands of American couples have demonstrated that satisfactory married life continues for both

DR. CLARENCE J. GAMBLE, a graduate of Harvard Medical School, has been engaged in teaching and research there and at the University of Pennsylvania. He is a medical consultant of the Human Betterment League of North Carolina. Interest in the effect of heredity on the intelligence of the next generation led him to make a quantitative study of the children born to college graduates. His observation that the men fail to replace themselves by some 20 per cent and the women by 35 per cent led him to review the means available for decreasing the quantity of inherited defects. One result is this article on sterilization, "a surgical procedure of value where a mental or physical handicap makes parenthood permanently undesirable, from the standpoint either of the patient or of the children who might be born."